

County: Sheboygan
 PINE HAVEN CHRISTIAN HOME, INC.
 531 GIDDINGS AVENUE

Facility ID: 7200

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SHEBOYGAN FALLS 53085 Phone: (920) 467-2401
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 71
 Total Licensed Bed Capacity (12/31/01): 71
 Number of Residents on 12/31/01: 70

Ownership:
 Highest Level License:
 Operate in Conjunction with CBRF? Yes
 Title 18 (Medicare) Certified? No
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 69

Nonprofit Church/Corporation
 Skilled
 Yes
 No
 Yes
 69

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis		Age Groups		Less Than 1 Year			
Home Health Care	No								
Supp. Home Care-Personal Care	No								
Supp. Home Care-Household Services	No	Developmental Disabilities		Under 65		1 - 4 Years			
Day Services	No	Mental Illness (Org./Psy)		65 - 74		More Than 4 Years			
Respite Care	No	Mental Illness (Other)		75 - 84					
Adult Day Care	No	Alcohol & Other Drug Abuse		85 - 94					
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic		95 & Over					
Congregate Meals	No	Cancer							
Home Delivered Meals	No	Fractures							
Other Meals	No	Cardiovascular		65 & Over					
Transportation	No	Cerebrovascular							
Referral Service	No	Diabetes		Sex					
Other Services	No	Respiratory							
Provide Day Programming for Mentally Ill	No	Other Medical Conditions		Male					
Provide Day Programming for Developmentally Disabled	No			Female					

Method of Reimbursement

Medi care (Title 18)			Medi caid (Title 19)			Other			Pri vate Pay			Fami ly Care		Managed Care						
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	1	2.8	144	0	0.0	0	0	0.0	0	1	1.4
Skilled Care	0	0.0	0	31	91.2	95	0	0.0	0	30	83.3	134	0	0.0	0	0	0.0	0	61	87.1
Intermediate	---	---	---	3	8.8	76	0	0.0	0	5	13.9	115	0	0.0	0	0	0.0	0	8	11.4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		34	100.0		0	0.0		36	100.0		0	0.0		0	0.0		70	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	0.0	Bathing	0.0	65.7	34.3	70
Other Nursing Homes	30.0	Dressing	7.1	64.3	28.6	70
Acute Care Hospitals	32.5	Transferring	28.6	47.1	24.3	70
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	24.3	47.1	28.6	70
Rehabilitation Hospitals	0.0	Eating	77.1	12.9	10.0	70
Other Locations	37.5	*****				
Total Number of Admissions	40	Continence	%	Special Treatments		
Percent Discharges To:		Indwelling Or External Catheter	4.3	Receiving Respiratory Care	5.7	
Private Home/No Home Health	2.5	Occ/Freq. Incontinent of Bladder	52.9	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	2.5	Occ/Freq. Incontinent of Bowel	22.9	Receiving Suctioning	0.0	
Other Nursing Homes	0.0	Mobility		Receiving Ostomy Care	0.0	
Acute Care Hospitals	0.0			Receiving Tube Feeding	0.0	
Psych. Hosp. -MR/DD Facilities	0.0			Receiving Mechanically Altered Diets	50.0	
Rehabilitation Hospitals	0.0	Physically Restrained	20.0			
Other Locations	7.5	Skin Care		Other Resident Characteristics		
Deaths	87.5	With Pressure Sores	4.3	Have Advance Directives	95.7	
Total Number of Discharges		With Rashes	2.9	Medications		
(Including Deaths)	40				Receiving Psychoactive Drugs	40.0

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97.2	89.4	1.09	85.1	1.14	84.3	1.15	84.6	1.15
Current Residents from In-County	100	82.7	1.21	80.0	1.25	82.7	1.21	77.0	1.30
Admissions from In-County, Still Residing	57.5	25.4	2.26	20.9	2.75	21.6	2.66	20.8	2.76
Admissions/Average Daily Census	58.0	117.0	0.50	144.6	0.40	137.9	0.42	128.9	0.45
Discharges/Average Daily Census	58.0	116.8	0.50	144.8	0.40	139.0	0.42	130.0	0.45
Discharges To Private Residence/Average Daily Census	2.9	42.1	0.07	60.4	0.05	55.2	0.05	52.8	0.05
Residents Receiving Skilled Care	88.6	93.4	0.95	90.5	0.98	91.8	0.96	85.3	1.04
Residents Aged 65 and Older	98.6	96.2	1.02	94.7	1.04	92.5	1.07	87.5	1.13
Title 19 (Medicaid) Funded Residents	48.6	57.0	0.85	58.0	0.84	64.3	0.76	68.7	0.71
Private Pay Funded Residents	51.4	35.6	1.44	32.0	1.60	25.6	2.01	22.0	2.34
Developmentally Disabled Residents	0.0	0.6	0.00	0.9	0.00	1.2	0.00	7.6	0.00
Mentally Ill Residents	40.0	37.4	1.07	33.8	1.18	37.4	1.07	33.8	1.18
General Medical Service Residents	22.9	21.4	1.07	18.3	1.25	21.2	1.08	19.4	1.18
Impaired ADL (Mean)	49.4	51.7	0.96	48.1	1.03	49.6	1.00	49.3	1.00
Psychological Problems	40.0	52.8	0.76	51.0	0.78	54.1	0.74	51.9	0.77
Nursing Care Required (Mean)	7.9	6.4	1.23	6.0	1.30	6.5	1.20	7.3	1.07